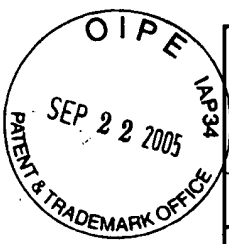


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 PTO/SB/17 (12-04v2)
 Approved for use through 7/31/2006. OMB 0651-0032
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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2005		Complete if Known Application Number 09/937,905-Conf. #5513 Filing Date October 1, 2001 First Named Inventor Shiken SHA Examiner Name E. Kemmerer Art Unit 1646 Attorney Docket No. 0230-0169P	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27			
TOTAL AMOUNT OF PAYMENT (\$) 1,220.00			

METHOD OF PAYMENT (check all that apply)

☒ Check
 ☐ Credit Card
 ☐ Money Order
 ☐ None
 ☐ Other (please identify): _____

☐ Deposit Account
 Deposit Account Number: 02-2448
 Deposit Account Name: Birch, Stewart, Kolasch & Birch, LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☐ Charge fee(s) indicated below
 ☐ Charge fee(s) indicated below, except for the filing fee
☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17
 ☒ Credit any overpayments

FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180

Total Claims 23 - 20 = Extra Claims 3 x Fee (\$) 50 = Fee Paid (\$) 150.00
Indep. Claims 3 - 3 = Extra Claims 0 x Fee (\$) = Fee Paid (\$)

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets - 100 = Extra Sheets /50 Number of each additional 50 or fraction thereof (round up to a whole number) x Fee (\$) = Fee Paid (\$)

4. OTHER FEE(S)

	Fees Paid (\$)
Non-English Specification, \$130 fee (no small entity discount)	
Other (e.g., late filing surcharge)	
1253 Extension for response within third month	570.00*
1401 Notice of appeal.	500.00

SUBMITTED BY

Signature <i>M. Armstrong</i> #28977	Registration No. (Attorney/Agent) 40,069	Telephone (703) 205-8000
Name (Print/Type) Mary Anne Armstrong Ph.D.	Date September 22, 2005	

*An extension fee of two (2) months was previously requested and paid for on August 22, 2005 in the present application. Thus, a fee of \$570.00 is required to obtain an additional one (1) month extension.